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The Child of the Broken Family:

A report based on the proceedings of a national symposium, Services for Children affected by Separation and Divorce







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THE CHILD OF THE BROKEN FAMILY:

A REPORT BASED ON THE PROCEEDINGS OF A NATIONAL SYMPOSIUM,

SERVICES FOR CHILDREN
AFFECTED BY SEPARATION AND DIVORCE

SPONSORED BY
THE MENTAL HEALTH DIVISION
HEALTH SERVICES DIRECTORATE
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JANUARY 16 AND 17, 1984 OTTAWA

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SERVICES FOR CHILDREN AFFECTED BY SEPARATION AND DIVORCE

SYNOPSIS OF TWO-DAY PROGRAM

I

The likelihood, nature and sequelae of family breakdown.

Chairperson: Dr. Bea Wickett

II

Services at the educational, social services, health and legal interfaces.

Chairperson: Dr. Jean Pettifor



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FOREWORD

THE CHILD OF THE BROKEN FAMILY is a report based on the proceedings of a National Symposium held in Ottawa, January 16 and 17, 1984.

This invitational Symposium, convened by the Mental Health Division of the Department of National Health and Welfare, was attended by mental health professionals, policy-makers, program directors, representatives of voluntary organizations and representatives of the legal profession from across Canada.

Through the several disciplines and regions represented by presenters and participants, and their common interest in services designed to meet the needs of children and their troubled families, there was valuable information exchange.

The Division acknowledges, with sincere appreciation, the immense amount of work undertaken and time given by so many in the process of planning and executing this symposium. Special mention must be made of Elizabeth Rajkumar who produced the initial draft of the proceedings, and Michele Costello who redrafted the document, and added important appendices.

Ivy Williams, Project Officer of the Mental Health Division, co-ordinated the symposium, and completed the task of final editing to produce the finished product.

Dr. Brenda Wattie, Director of the Mental Health Division acknowledges the special contribution of Dr. Brian McConville, Pediatric Psychiatrist, Consultant to the Division, and Dr. Q. Rae-Grant, Psychiatrist-in-Chief, Toronto Sick Children's Hospital, in planning and mounting this symposium.

OPENING REMARKS

DR. BRENDA WATTIE

Director Mental Health Division Health and Welfare Canada

Background to the Symposium

The Mental Health Division of Health and Welfare Canada collaborates closely with provincial government officials, voluntary professional associations and many other special interest groups. Its concerns include a range of preventive and intervention strategies, such as programs for enhanced treatment, rehabilitation and long-term support.

With a mandate to work for the highest possible quality and maximum reach of mental health programs in Canada, the Division provides a national focal point for the many facets of mental health and mental ill health. Among the subject areas of particular interest to the Division are:

- children's mental health
- services for long-term patients
- suicide
- disturbed offenders
- needs of special groups in the population (e.g. the disturbed elderly, victims of violent crime)

As a modus operandi, the Division co-opts experts from specialist fields across Canada to serve on task forces and working groups and to participate in symposia and workshops on issues felt to be of outstanding concern. The work of these experts is incorporated into publications, reports, recommendations and working documents, which the Division makes available to provincial governments as well as academic and other professionals working in the mental health field.

While responsibility for the planning, initiation, and direction of mental health programs for Canadians falls within provincial jurisdiction, the Mental Health Division serves as a focal point for the collection, analysis, packaging, and distribution of information and advice on programs, developments and options. The best known and most visible instrument for achieving this is the bilingual publication "Canada's Mental Health" ("La Santé Mentale au Canada"), which has a quarterly circulation of 34 000 across Canada. As a multidisciplinary journal addressed to mental health professionals, "Canada's Mental Health" reaches over 100 000 readers, one third of whom are francophone. The Division also produces a number of other publications, such as reports, symposium proceedings, and guideline documents.

Landmarks in Children's Mental Health

Let me review briefly some of the events that have led us here today.

In 1973, at La Sapinière, Québec, a very significant Canada-U.S. Symposium was convened by Dr. Yvon Gauthier, who was then head of the Department of Psychiatry at the University of Montreal. The title was "Impact of Change on Mental Health and Child and Family Developments". It was significant in part because it became the point of origin for many later developments.

In 1979, a private symposium was held in Toronto, at which federal and provincial officials met with U.S. state officials responsible for children's mental health programs. Dr. Naomi Rae-Grant's contribution at that event was particularly outstanding.

In Ottawa in 1979, Senator McGrand conducted a Senate Sub-Committee inquiry into the origins of juvenile delinquency, which resulted in a document that is well worth reading.

In November 1979, we held a meeting in Toronto on "Strategies of Prevention and Intervention in Children's Mental Health", which was a continuation of the themes of the previous meetings in La Sapinière and Toronto.

In 1980 we established a Task Force on Children's Mental Health under the chairmanship of Dr. Quentin Rae-Grant, Chairman of the Division of Child Psychiatry at the University of Toronto. It has now completed its work, and has produced a document called "Prevention Now". In that Task Force we concentrated on preventive strategies rather than on intervention through services.

In 1981, as part of the work towards the "Prevention Now" document, we held a symposium in Toronto on the subject of "Preventive Measures in Children's Mental Health".

Following the completion of "Prevention Now", we called together an <u>ad hoc</u> group of professionals from across the country to look at the question of services for children. From this group a smaller Anchor Group was formed. We are hoping that this Symposium will suggest areas that the Anchor Group may usefully develop and directions it might take.

Children's Mental Health

The area of children's mental health is of critical importance. The financial burden of mental illness on Canada's health care system has been estimated by Statistics Canada and the Canadian Mental Health Association at one billion dollars. This is but a minor part of the total social burden, however, for it does not account for costs to the social service system, to the correctional system, and to national productivity. Furthermore, there are social costs that we cannot put any dollar figure on, for they involve human suffering and loss. The burden is staggering.

The origins of mental ill health are to be found in a complex of biological and environmental determinants that ordinarily come together in the critical early years of child development. There is an urgent need to examine and assess services for children who are already showing signs of maladjustment and disturbance. Good, well-staffed services for children are expensive; we must work for coordination and collaboration among the overlapping jurisdictions concerned -- health, social services, corrections and education.

For these reasons, the Mental Health Division has pledged to put maximum emphasis on children's mental health programs. In this context, I would like to pay tribute to Dr. Brian McConville, Consultant in Child Psychiatry to the Division, who has provided us with valuable support and assistance. I hope this Symposium will prove to be a productive and stimulating event, one that will provide a solid and worthwhile basis for further development of mental health services for children in Canada. I strongly encourage you to stay in touch with us. Let us have feedback about this meeting, but also, let us know what you think we should be doing. Give us information about interesting and effective programs operating in your part of the country, particularly information that could be published in "Canada's Mental Health".

I hope this Symposium will be a useful and valuable continuation of this whole series of mental health events focused on children.

Key-Note Address

FAMILY BREAKDOWN: BEFORE, DURING AND AFTER

DR. QUENTIN RAE-GRANT

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Of the major political, economic and social changes that characterize the twentieth century, none are more striking and widespread than those involving the concept of marriage. The divorce rate has been rising steadily in most Western countries, including Canada, but there has been little scientific study on the causes and impact of sociological, epidemiological and psychiatric factors related to this major revision of social structure.

Statistics on marriage, divorce and remarriage rates for women show that the number of divorces has increased steadily throughout this century. There was a temporary peak in the divorce rate immediately following World War II, but increases have been most marked since the 1960's. The divorce rate has continued to accelerate; currently in California, for example, the number of first marriages equals the number of divorces in a year, and the chances of a child living with the birth parents until the age of 18 are one in ten.

In Canada, the 1968 amendment of the federal divorce law dramatically altered the grounds on which divorce could be obtained. As a result, the divorce rate increased at a rate five times greater than it had in the previous decade. It now stands at 2.4 per thousand of the population.

The interest of the state in family affairs has traditionally been confined to such areas such as taxes and education, but it has now been expanded to include the protection of children and, increasingly, all family members from domestic violence. In addition, the state has an interest in ensuring that viable support arrangements are established for both the partners and the children involved in divorce.

Forty per cent of all Canadian marriages now end in divorce, and by 1977, (the most recent year for which statistics are available), 1 123 000 Canadian children had witnessed the divorce of their parents. The divorce rate varies across the country. British Columbia has the highest rate, followed by Alberta, the Yukon and Nova Scotia. The Ontario and Quebec rates are in the middle range, roughly equal to each other, and the lowest rates occur in Newfoundland and Prince Edward Island.

In the U.S., persons experiencing disproportionately high rates of divorce are those who:

- marry before the age of 20
- are of lower educational status
- are socio-economically disadvantaged
- belong to minority groups.

The earlier a marriage occurs, the greater is the likelihood that it will not last, particularly if pregnancy has precipitated it. The highest rate of divorce occurs when the two partners are less than three years apart in age. A history of divorce in the previous generation is associated with a greater chance of divorce in the present, and if one partner in the marriage has previously been divorced, the chances of breakdown rise from 40% to 75%.

In general, proneness to divorce is decreased by high occupational status; in fact, the higher the husband's income is, the lower is the likelihood of divorce. Conversely, the chances of divorce rise with the level of the wife's income.

There is an increased chance that a marriage will last if the partners share similar socio-economic backgrounds, are of the same religion and differ only slightly in age. On the other hand, different religious affiliations tend to increase the chances of breakdown, even if one of the religions is strongly opposed to divorce.

There remain a number of economic and symbolic barriers to marriage dissolution. The expense of divorce proceedings and the maintenance of two residences, as well as the necessity of providing for children following separation, are major economic concerns which act as deterrents to divorce. Moreover, there are psychological penalties, such as loneliness, the difficulty and insecurity involved in finding alternate partners, and the emotional cost to children. Religion continues to hold unsatisfying marriages together, as do social pressures from kinfolk, family and community, especially in smaller, tightly-knit communities.

However, the range of alternatives to marriage is growing. Women, for example, feel increasingly more able to strike out alone, although substantial financial hardship continues to force large numbers of female-headed house-holds into poverty. The independence sought by women through separation or divorce may indeed prove fulfilling, but it may also be illusory. Separation may initiate a period of loneliness and alienation, and an assumption of responsibility for which some women are unprepared. The crisis of separation may have either a positive or a negative outcome. The concept of alimony as a means of providing interim rehabilitative support is acceptable in certain instances, but the interpretation of alimony as a lifelong insurance scheme is now seen as detrimental to all involved, as it discourages the development of independence.

The process of marital dissolution has become less laborious and traumatic as the law has evolved to better meet social needs. The period of separation required prior to divorce action has gradually been reduced. Nonetheless, despite law reform emphasizing joint responsibility for child care, it is still the case that only 10% of children are awarded in custody to the father. As part of the process culminating in separation and divorce, couples are increasingly being advised to try to reach agreement before resorting to lawyers on the vital issues of custody, access and property division. Some lawyers do favour mediation as a means of dealing with unresolved issues, but many still prefer the adversarial approach, which, unfortunately, can cause an escalation of the dispute.

The emotional bond between couples is lasting, and often results in emotional battles that may continue long after the legal battles have ceased. There is a danger that children may be caught as pawns between hostile parents. Aggrieved parents may handle their residual anger and distress by sabotaging, consciously or unconsciously, visiting and access arrangements. Consequently, divorce can train children to develop manipulative skills of their own.

There are potentially serious implications for the mental health of both adults and children in separation and divorce. A comparison of a group of children that had major mental illnesses or delinquent problems with a matched group that did not have these problems revealed that the number of broken homes is the one factor that emerges repeatedly as different between the groups.

Divorced and separated adults are disproportionately over-represented in psychiatric records, although the reason for this link is not entirely clear. Mental illness rates for the separated and divorced are frequently 20 times as high as those for married persons. In the U.S., marital status is linked, strikingly, to rates of suicide, homicide and even increased proneness to physical illness. The symptoms commonly found in adults following separation and divorce are frequently responses to the loss of a major attachment figure. Their mental state is characterized by ambivalence. Disruption in functioning continues until the separated parties have severed the emotional bond uniting them, in a process comparable to mourning for the death of a spouse. The length of this transitional stage depends upon a variety of variables, but until it has been fully worked through, the individual is not in a position to form a new, permanent bond.

Serious research into the effects of divorce on children, using samples of reasonable size from child psychiatry populations and non-clinical groups, is of relatively recent origin.

Two major non-clinical studies have been performed involving children whose parents are divorced. The main findings of Wallerstein and Kelly are that the mental health difficulties of such children vary according to age, with children in the 9-12 age group exhibiting relatively better coping

skills than those in three other age groups (ranging from pre-school to 18). However, in this study, (undertaken in Marin County, an affluent area in California), neither control nor comparison groups were used; therefore, the extent to which the behaviour and characteristics described resulted from divorce as opposed to environmental factors remains questionable.

multi-method, multimeasure, longitudinal study performed by Hetherington and Cox on the effects of divorce on "mother custody" families did include the use of controls. It concluded that the adaptation of children must be discussed within the context of relations between their parents. A hostile atmosphere between spouses creates an environment in which the manipulative skills of the children can flourish as they experience a rapid de-idealization of their parents. It is clear that boys are more seriously affected than girls by divorce, and that the duration of their disturbance is longer than it is for girls. The study shows that, one year after divorce, children of divorced families function more poorly than children in twoparent families. Conduct disturbance is highest in one-parent families that have high levels of conflict, is lesser in intact families with high levels of conflict, is lesser still in divorced families, and is least in low-conflict non-divorced families. Hetherington has attributed this result to the removal of the buffer that the presence of the other spouse provides. Wallerstein and Kelly study showed evidence of "diminished parenting" in the first year after divorce, and the Hetherington study showed a remarkable recovery by the end of the second year.

During the first year, most forms of therapy, including intensive psychotherapy, are not effective. However, a behaviour modification program oriented towards increasing the practical parenting skills of the custodial parent appears to have had some success.

In summary, it is not unusual for children to show a variety of signs of emotional distress or behavioural disorder in response to parental separation or divorce. Often, over time, the children adjust to the situation, and the symptoms recede. Acceptance of the fact that everyone will be hurt by divorce is the best preparation for what lies ahead, since there is no such thing as an easy, compatible divorce. The situation is not irreparable, however, and those involved may emerge from the experience improved. Research does not support the widely-held notion that it is better to stay together for the sake of the children; rather, it has shown that, after the second year, children in high-discord intact families fare worse than those whose parents have divorced, even though some conflict remains.

I have three recommendations to make:

1. RESEARCH

There is a need for longitudinal studies that include comparison and contrast of several different groups and situations, as follows:

- children from intact families
- children from divorced families
- children from single-parent families occasioned by death
- children from single-parent families electively constituted.

2. PUBLIC EDUCATION

It would be of real value to a substantial number of people if a hand-book could be developed, covering such areas as:

- pre-divorce procedures
- problems likely to be encountered, reactions likely to be experienced, and ways of resolving these
- the factor of time
- issues relating to step-parenting or the introduction of new partners.

3. SERVICE

Efforts should be made to link the existing multitude of small, though often efficient services, in order to expand the total range of services available, particularly in large metropolitan areas. Areas of focus must include not only the family and its functioning, but also the inevitable economic impact for all involved.

Panel Presentations

FAMILY DEVELOPMENT - CRISIS POINTS

DR. BRIAN McCONVILLE

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Clinical Director Beechgrove Centre, Kingston

Consultant in Child Psychiatry to the Mental Health Division Health and Welfare Canada

I would like to introduce the somewhat wider perspective of crisis points in family development.

Certain studies stress the common elements among various states of bereavement, loss and separation, but they also underscore the need for differential studies that would contrast children experiencing threatened or actual separation with those suffering actual bereavement. In this context, it is important to consider situations that may lead to separation and divorce.

Many separations appear to occur during particular developmental crises. As a result, the concepts of primary and secondary prevention may be possible modes of avoiding the sad sequelae of family breakdown that Quentin Rae-Grant has described.

There are difficulties inherent in defining primary and secondary prevention as concepts, and also in determining accurately levels of stress and illness thresholds. Rutter's findings suggest that stress affects progress geometrically, not merely additively, so that the alleviation of three out of five factors, for example, may be sufficient to reduce stress or illness thresholds.

A review of the research in this area allows us to arrive at the following conclusions:

- 1. Family stresses are greatest at particular crisis points.
- 2. Response to a particular crisis may be affected by particular symbols relating especially to past events.
- 3. The crisis may be a "final straw" rather than a solitary factor.
- 4. Response threshold in the family may be lowered cumulatively through job stress, exhaustion, fear of unemployment, marital stress, physical illness and similar factors.

Developmental stress points for given families or individuals are not completely predictable, but certain times appear generally to be more vulnerable than others. If children are to be prepared to withstand the vicissitudes of their own adult lives, they need to develop both a sense of basic trust and a "comfort cushion" in the face of adversity. It seems that these can be provided by a combination of Winnicott's "good enough" parenting and a secure environment.

However, there are syndromes associated with a lack of challenge and an absence of stressful events in a child's life, especially in an atmosphere of superficial interchange between parents and children. Such an atmosphere does not adequately prepare children for later life, since affectual commitment is lacking and models of adequate coping behaviour under stress are not provided. Young people in love are often not prepared to accept stress as inevitable, so that their capacity to accept guidance before any stress has entered their lives is minimal. Thus, in general, the point of therapeutic impact should be early in the development of a stress condition, when the possibilities for effective intervention by pediatricians and family physicians are greatest.

A first pregnancy can precipitate stress in a young couple's life, and, in the absence of earlier bonding and mutuality, responses appropriate to the situation may not be forthcoming. A further increase in the stress level can be occasioned by the birth of the child, who has his own temperamental givens. For the parents this may heighten the risk of dysfunctional patterns, particularly paternal withdrawal from the family and the concomitant over-intensification of the mother-child bond.

The foundations of marital breakdown often lie in inadequate responses to the early stresses that such common, normative developmental crises cause. Early intervention has the potential to prevent breakdown if the point of preventive impact is early in the process of stress build-up, before maldevelopment in the marital relationship has taken root. At this stage, however, couples are in contact chiefly with family physicians, pediatricians and other front-line health practitioners, rather than with psychiatrists or other mental health workers. There is, therefore, a danger that parental mental health difficulties may be overlooked at the precise point where expert guidance and planning are most necessary. Approaches to individual couples or groups should focus on common problems, and also on individual differences.

There are a number of common developmental crisis points that present certain typical problems and tasks, which allow for either success or failure at a certain stage. These crisis points may be listed as follows, more or less in the order of their occurrence in an evolving relationship and marriage:

- 1. Infatuation versus initial love
- 2. Loving and caring versus sexuality
- 3. Basic trust versus basic mistrust
- 4. Joint functioning versus individual autonomy

- 5. Giving to others versus exclusive demands for oneself
- 6. Tolerating frustration and uncertainty versus rage and intolerance
- 7. Helping each other (with some individual sacrifice) versus insisting on one's own rights
- 8. Affirming the uniqueness and warmth of each child, versus some archaic assumptions about "standard children"
- 9. Fashioning a child's intellectual growth versus either overstimulating or understimulating
- 10. Affirming both the emerging assertiveness and sexuality of the adolescent child versus being either too lenient or too inhibiting
- 11. Letting go of teenagers as necessary, but allowing for flexible return, versus abandonment, or excessive love/power binding.
- 12. Hanging in, versus quitting at any of the above stages.

Against this developmental background, more realistic and effective early interventive and secondary preventive measures may be developed. In any such intervention, over-simplification must be avoided, (although it may be unavoidable in group interventions), and individual differences must be taken into account. The most promising programs are those which focus on a composite of the particular difficulties of each developmental phase, and which address clinical and developmental problems simultaneously.

Special training is recommended for disciplines likely to encounter the child and family early on, and the possibility of a consulting role for mental health professionals should be considered.

Where the levels of family dysfunction are severe and occur against a background of long-term deprivation and loss, it is difficult to suggest simple approaches. While some of the findings of the Head Start program and of Project Re-Ed are of interest, there is no convincing evidence of their efficacy. Where there are neither built-in measures to demonstrate efficacy nor a general system of evaluation, one must proceed with caution.

Given the present state of our knowledge, we may not have the capacity to intervene effectively in the case of some very severe problems. There is probably reason to suggest that "burn-out" separation may be the end result of long-term poverty and deprivation.

A possible role for the law has been suggested in cases where parents are unable to achieve even a minimally acceptable level of child care. Legal termination mechanisms that protect the rights of parents while ensuring a good environment for children are extreme solutions, and must be approached with great care. In the context of the developmental structures that I have suggested, such intervention should most often occur before rather than following separation.

I hope that our discussions will be of importance in indicating the need for supportive structures for those in need, especially in this time when many parents are unemployed or under-employed, and when the effects of the long-term stress this produces on a developing family structure are only beginning to be studied systematically.

Experiences of the Child

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Over the last 10 or 15 years, the idea that divorce is better for children than marriage with continued friction has become increasingly popular. However, this notion is based no more firmly on scientific evidence than were the earlier religious notions opposing divorce as a solution to marital conflict. This newer climate in favour of divorce tends to put greater emphasis on the rights of parents, particularly those of the mother, than on the needs and reactions of the children involved.

Wallerstein and Kelly have shown that a majority of children of all ages are adversely affected by marital breakdown. One year after divorce, the initial symptoms are often as intense, have consolidated, or, in certain cases, have become even more pronounced.

A child's reaction to separation and divorce is closely related to his age and to his capacity to understand the situation, and is a function of the struggles inherent in the particular developmental stage through which he is passing. Fear, anger, confusion, a feeling of abandonment, and the central effect, a feeling of depression, are common. These find expression in a variety of forms.

Children between two-and-a-half and four years are the most vulnerable. They experience severe regression, separation, anxiety, and a variety of sleep and feeding disturbances. In some cases, these symptoms resolve themselves in the months following the crisis, depending upon the type of caregiving the child receives. One year later, however, 63 per cent of these children show a more-or-less neurotic consolidation of their early reactions. Generally, such a consolidation is closely tied to family atmosphere and to the parents' patterns of dealing with the separation. At this age, girls seem to be more seriously affected than boys.

Among children from four to six years, reactions can be less regressive. Unhappiness, depression, fearfulness and confusion are common in these children, and their inner struggles find more organized expression in their imaginary life and play activities. Children at this age are in the midst of the oedipal phase, and are thus struck at the very centre of their evolution. Because they are already struggling to build their identity through the resolution of a conflict involving their most intimate relationship

with both parents, they feel the loss of one parent as a complete loss, and begin to doubt the solutions that they are in the process of finding. The Wallerstein and Kelly study showed that one year after divorce, 44% of pre-schoolers were in a significantly more serious state. The feelings of self-blame, guilt and responsibility that they experienced may be explained in terms of the difficulty of resolving oepidal conflicts amid parental breakup. It has been established that such conflicts are more likely to be successfully resolved in the reassuring climate of a stable relationship between the parents.

Children of six to 10 years experience essentially the same reactions. The closer they are to the oedipal age, the more precarious is the equilibrium they have reached, and the greater is the likelihood of a possible regression. These children experience sadness, fear and disorganization, a feeling of being deprived of the essential, and anger against the absent parent. They have an imaginary life which tends to be well organized around the notion of parental reconciliation.

It seems that the capacity to face and master the stress caused by parental separation or divorce clearly emerges around the ages of nine and 10. Wallerstein and Kelly speak of "an important milestone in development" at this age.

Curiously, Wallerstein and Kelly did not study the reaction of infants to parental separation. If this is to be done, account must be taken of both the limited cognitive capacity of infants and the intensity of their relationship with each parent. We are now aware that the young child is more competent, and more capable of a relationship with several parental figures than we had thought. In addition, parents now tend to adopt a more equal distribution of work than they formerly did. It is possible that the loss of one of two parents can lead to an intense reaction of the sort explained in the work of Spitz, Bowlby, Robertson and others. The remaining parent may be less available to the child emotionally as a result of his or her own difficulties. This is an important variable. The parent is angry, depressed, and very anxious, and is consequently less able to be sensitive to the child's needs.

The child's normal development is organized around the interaction of two or several figures. But during the separation and individuation phases, the presence of the mother and adequate responses from her are essential to the child. Symptoms such as developmental delays or sleep and feeding disturbances may be understood in the context of a mother's diminished sensitivity to the needs of the child following separation.

To conclude, I would like to say a few words on the child's need for a sense of structure. Children of all ages appear to feel keenly a loss of equilibrium in their lives, an absence of an established structure or framework, such as the family, within which they are secure. This has been observed in children coming to hospital for treatment. For the child that sees the mother or father leave, there is a feeling of loss and a threat

of disequilibrium that will never end. Wallerstein describes the task of absorbing loss as the single most difficult task imposed on children by divorce. Long-term observation of children from separated families reveals an eventual decline in acute reactions accompanied by a certain recovery of equilibrium and a renewal in the course of development. Nevertheless, the children involved continue to exhibit a systematized desire for structure and permanence, expressed, for example, through continuing fantasies about parental reconciliation, which are very often unrealistic. Are we thus faced with a desire which is genetically inscribed in the human child, or is it a desire that results from early years lived with close ties to parental figures?

It is clear that this desire among children is not linked exclusively to the separation or divorce of parents. It is also found in any situation where parental quarrels have been frequent. What I have in mind here is the very intense feeling of responsibility that some children exhibit, the desire to take over the situation and resolve it, the distrust of both parents, and the feeling that life would perhaps be easier if he or she could assume responsibility. Such reactions are inherent in the oedipal struggle, but they are also related to much earlier, more primitive feelings of basic trust or distrust in each parent, which are very often rooted in the early mother-child relationship.

The concept of "children without childhood" has recently appeared. It seems that some adolescents experience a feeling of having been "caught" very early in the situation; following separation or divorce, they feel they must take on the parental role towards younger children or even towards their parents. This reaction seems to be rooted in an early desire on the child's part to take over and control a situation of parental discord. While adults see this as a very mature reaction, such children may have missed an important part of their childhood, that of being weak and being able to be consoled, and of having someone to take care of their feelings. The feelings they have been unable to release may only reveal themselves later.

Systems and Services

EDUCATION

DR. H. KEITH SIGMUNDSON

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Only in the twentieth century has the concept of universal education been recognized as an appropriate and necessary social goal. Indeed, our society has now surpassed this goal and accepted the additional responsibility of teaching the physically, mentally and learning disabled and the socially disadvantaged. It is now recognized in the field of education that it is no longer sufficient only to train people for employment. There must also be a concern for the quality of life.

The family system, too, has undergone profound change. Increased geographic mobility has led to the dissipation of the largely rural, extended family unit, which has been replaced by a largely urban, nuclear family unit. The modern family encounters profound stress, and the rising incidence of family breakdown results in dysfunction in all family members, particularly the children.

It seems logical that children experiencing dysfunction as a result of divorce should first be dealt with at the interface of the educational system, particularly in view of the absence of the extended family and the declining role of the church in our society. The earlier stress is experienced, the more likely it is to cause future difficulties along the developmental continuum. Children of divorce exhibit problems of a generic nature, such as loss of concentration, anxiety, depression and guilt, symptoms which can be brought on by stressors other than divorce. Broadly-based programs for dysfunctional children which arrange intervention at the school interface must be timely, and designed not to encroach upon the rights of parents.

Classroom teachers must have the skills necessary to identify dysfunctional behaviour and emotional symptoms in students; in addition, they must be sensitive to the individual child's need for understanding. The educational system must recognize the changing needs of society and adapt its methods accordingly. Teachers must be trained to explore symptoms sensitively and to help strengthen the coping skills of students at all levels. They could achieve this, for example, by using books that reflect more realistic family constellations, and by encouraging open discussion of the child's feelings on the subjects of divorce and other hitherto taboo subjects.

"Building the Pieces", a pilot project introduced in Manitoba in 1978 by the Social Welfare Planning Council of Winnipeg, was never entirely adopted by the school system. This occurred for a variety of reasons, but was due in part to the reluctance of teachers to handle situations for which they had not been adequately trained.

Classroom teachers must have regular interface contact with a mental health professional who forms part of a multidisciplinary mental health team. Such interface would give teachers the opportunity to question apparently dysfunctional behaviour and to request referrals where emotional causes are suspected. Initial assessments may then be made and intervention schemes planned, with remedial and preventive programs being undertaken on both an individual and a group basis.

Teachers must be trained to detect early the symptoms of dysfunction in children of different ages, and to respond in a manner that is appropriate and helpful to the child.

Life skills should be taught in junior high and high school classes. The school system should also assist in the education of parents in family life issues, a task that could be initiated through parent-teacher groups and achieved in cooperation with local associations, churches, and self-help organizations.

In summary, the educational system appears to be a logical area in which a mental health intervention scheme for children of divorce could be successfully implemented. Intervention should not be intrusive, however, and should be designed to meet the individual needs of each child. Furthermore, the school and its mental health team should involve themselves at all points in the continuum of primary, secondary and tertiary prevention. The educational system must gear itself to meet the changing dynamics and needs of families and of society as they evolve.

Systems and Services

SOCIAL SERVICES

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We know that the child-bearing years are those most heavily affected by divorce, that about half a million children in Canada have been involved in a divorce during the last 10 years, and that three-quarters of divorced people remarry eventually, a reconstitution that can be painful and complicated for children.

However, despite our awareness of these facts, a "cloak of denial" continues to surround the subjects of separation and divorce, prompting children to feel embarrassed or ashamed about discussing their family situation outside the home.

In order to offset this, we know that we need services provided on a developmental continuum, moving flexibly from an early focus on the crisis of divorce to ongoing support and restorative work. Help for children is most crucial at the point of marriage breakup, because parents may be too pre-occupied with their own difficulties to attend to the grief of the children.

The cumulative risk factor is very high indeed. Even when the dismantling of the family has been achieved in a relatively amicable manner, there is evidence of disturbances in children ranging from depression, withdrawal and anger, to lower standards of achievement at school and, among adolescents, anti-social or delinquent behaviour.

The existing "hit and miss" service arrangements in various communities need to be replaced by a carefully assembled network of support services that can be made available to children at every stage in the process of family breakdown. To achieve this, the active collaboration of many professionals, agencies, and social systems will be required.

There must be an alertness to children's needs among service-givers at all levels, and a readiness to refer those requiring assistance to appropriate parts of the network.

Such a cooperative effort will require two levels of intervention: (i) intervention into the organization of community services, in order to facilitate coordinated efforts, and (ii) intervention into service delivery, to ensure the effectiveness of services at the individual level.

Regarding the first level, a successful model for the organization of services already exists in the form of the one- or two-day community workshops held by the Justice Institute in Vancouver. Their agenda includes consciousness raising, inter-disciplinary training, and the development of referral patterns. For the present purpose, workshops might include such participants as family physicians, psychiatrists, teachers, clergymen, mediation counsellors, pre-school representatives, mental and public health workers, welfare workers, as well as representatives from family services, community centres, churches and youth organizations, and, finally, carefully selected media representatives.

The objective of the workshops would be the development of a repertoire of possibilities and alternatives that would facilitate local cooperation and update knowledge of both colleagues and new programs in the field, particularly in the local area. A small task force formed at the end of the workshop would be given the responsibility of coordinating follow-up activities. One of the most important of these activities would be the development of a continuing public education program focused not only on access to resources, but also on removing the stigma currently associated with divorce. The program should emphasize the fact that divorce is not an index of failure or of social disorder, but a major crisis which can result in personal growth.

The goal of the second level of intervention would be ensuring that members of the network, whatever their reason for contact with a family or child, are indeed prepared to assume responsibility for "red-flagging" children in need of attention, and for making referrals when necessary to the appropriate program or service. Successful models of specific types of intervention for groups of children already exist. For example, some workshops currently offer children therapeutic activities and opportunities for discussion in order to strengthen peer and other social support, to encourage the ventilation of feelings, to provide anticipatory guidance, and to develop competence, hope and self-esteem. Such models have been developed by both the Family Service Association of Metropolitan Toronto and Family Services of Vancouver.

In addition, the development of outreach efforts to particular target groups is necessary. Members of some ethnic minorities, for example, choose divorce against the wishes of their elders and leaders, and, as a result, are often faced with exclusion from their extended families and natural support groups. According to research, other groups at risk include young divorcing parents with limited education or a low income, who are unskilled or only marginally employed. The children of any of these groups are also likely to be at risk. Particular attention should be focused on rural areas, where often services are even more sparse than in urban areas.

One important step towards achieving cooperation among the many disciplines would be the inclusion of the subject of separation management for children in the various professional curricula and in clinical practice. Research into the most pertinent variables and long-term follow-up studies should also be undertaken.

In summary, our goal should be the development of a workable support system based on collaborative linkages among service systems, which would reach beyond the traditional parameters of service delivery and provide a range of interventive strategies, from crisis management to ongoing support and competence restoration.

Among the measures we must take to achieve this goal are: (1) the appropriate training and orientation of front-line workers and related professionals, and (2) the promotion of attitudinal change in society to (a) reduce the stigma associated with divorce, and (b) increase awareness that family fragmentation has become an integral part of society, and that the large population of children affected by it cannot continue to be ignored.

The Law

JUDGE GEORGE THOMPSON Judge of the Ontario Provincial Court

Family Division, Toronto

Former Associate Deputy Minister Children's Service Division Government of Ontario

There are four general areas in which the law can become relevant to the process of family dissolution. These are (1) the "corollary" areas of the law relating to support and to the division of property and custody, which are generally provincial laws; (2) the federal divorce law, which also deals with support and custody, but not with property; (3) child welfare/protection laws, in cases where children are at risk, and (4) the criminal law, in cases where family violence is involved.

Questions pertinent to the legal aspects of separation and divorce are: How ought the legal process to function once it has become relevant? How can it assist all parties, particularly the children, through the process of marriage dissolution?

The objectives that the legal process seeks to accomplish may be identifed as follows:

- to minimize acrimony between the parties involved
- to help each partner understand the importance of maintaining his or her function as a parent after separation
- to complete the process of dissolution relatively quickly, with at least some respect for the child's sense of time
- to reach decisions that are sensible in the context of research into the effects of divorce and separation on children, and that can meet, to some degree at least, the needs of such children
- to ensure that the process is not too costly
- to reach decisions that are enforceable
- to reach decisions that are realistic, appropriate to the "real world" in which the parties exist

A large number of positive changes have occurred in divorce law over the last 20 years, and many of the less helpful traditional approaches have all but disappeared. For example, the law governing financial support has been altered dramatically, so that alimony is now seen as a means of assisting parties back to economic independence rather than as a perpetual insurance policy.

However, in order to determine what resources are yet needed, I think it would be useful to focus on some of the areas in which the law falls short.

It is very important that we recognize that the number of contested cases is in fact very small. The dynamic underlying the bargaining process between couples and the relevance of the law are issues that have been coming under increasing scrutiny as objects of study. This is a valuable development. The law becomes involved only when the bargaining process breaks down; thus, uncertainty regarding the content of the law can have a profound impact on the will of the parties to reach agreement. A legal framework that allows judges to exercise substantial discretion only tends to prolong legal battles, as each party seeks to convince the court to exercise discretion in his or her favour.

Much of existing legal procedure bears little relationship to the bargaining process between couples, and is therefore of limited value. For example, we try to protect the child's interests by instituting reports or studies, such as the Official Guardian's Report in Ontario, that assess arrangements made by couples for custody and support. In actual fact, however, the vast majority of these arrangements are simply adopted as they are, in a "rubber-stamp" process. The review is virtually meaningless, because all parties involved are reluctant to alter a decision that has already been made and has been implemented for some time, unless the child is at very serious risk.

Many members of the legal profession lack the skills necessary to guide parties through the bargaining process, because their training emphasizes the use of adversary techniques in the resolution of problems. Only very recently have law schools begun to teach negotiating skills as part of the curriculum. In addition, judges presiding over pre-trial discussions are now being asked to function as mediators, a task requiring skills most have not acquired in either their formal or their practical education.

The use of the concept of fault as a factor in the resolution of disputes at the legal stage has declined considerably. It continues to be highly relevant, however, in divorce law. If fault can be proven, the three-year separation period required for divorce is no longer necessary. The new federal divorce law will likely further reduce the required period of separation; as a result, it will also reduce the possibility that any benefit can be gained from pursuing questions of fault. This is a positive development, but the concept of fault is also applied to issues of support and custody, and can aggravate disputes in these areas by questioning the competence of parents.

The cost involved in the resolution of family disputes for both the state and the individual continues to be staggering. Much of it is hidden in legal aid costs. Despite some limited progress (in Prince Edward Island, Manitoba, and an experiment in Ontario), Canada is still a long way from having a unified family court on a nation-wide scale. Existing inequities in the system contribute to raising the costs of resolving family disputes unnecessarily.

Laws are being reformed despite inadequate knowledge of and research into the effects of the legal process on children. In addition, those who make the laws and those who apply them are frequently unfamiliar with the limited information currently available on the subject.

In the areas of custody and access, there has been a realistic retreat from some of the simplistic, even archaic assumptions that have traditionally dominated divorce law. These assumptions and the use of correspondingly simplistic criteria have been replaced, however, by a lengthy list of factors which the courts are now required to consider. These introduce a great deal of subjectivity into the system. Unfortunately, research is now inadequate to support debate on the merits of new options, such as the increasingly popular notion of shared parenting.

The area of access presents considerable difficulties. Parties involved tend to deal with access as an afterthought, and often reach hasty compromises that are only marginally related to the "real world" in which they live following separation or divorce.

Once a court order is made, problems of enforcement arise. Difficulties are frequently encountered in the areas of restraint, custody and support, often to the detriment of the children involved.

I would like to propose the following changes to the legal system:

- The introduction of appropriate mediation and conciliation services early in the process of marital dissolution, to help families avoid the legal process whenever possible. I would even support the establishment of compulsory mediation services, which would replace later reviews. This would serve to reduce levels of conflict. It would also be faster, less expensive, and at least as successful as the system of court orders. More realistic solutions may become possible if couples are encouraged to view the resolution of their problems as an issue not limited to the courts.
- The introduction of more predictability and less discretion in divorce law. I would support, for example, a more broadly-based community property system which would permit less discretion, and which would have a positive impact on the bargaining process.
- Legal representation for the child, but only in hotly-contested cases. There are tremendous problems regarding this issue, problems of role and problems of training. Nonetheless, in Ontario this approach has proved quite successful in mediating custody disputes.

- The acceleration of the legal process through mechanisms such as mediation, statutory limits, and assessment (in cases where there is a major, ongoing dispute). It is important to recognize the difference between mediation (the parties involved make decisions) and assessment (decisions are made by someone else), and to know in what context one is more useful than another.
- Continued improvement in the enforcement of custody orders. Recent advancements are the drafting of an international treaty and the development of stronger provincial laws, which discourage individual action. The enforcement of support orders has also improved, but the area remains problematic, particularly in terms of the provision of effective resources for enforcement.
- Training that enables legal professionals to recognize the potential for subjectivity in their decision-making. Judges should be reached, because they can become isolated and resistant to feedback.
- A balance in child protection law between the interests of the child and the intervention of the state. The delineation of limits to state intervention is, however, a matter of intense debate.
- Increased recognition that family members need the protection of criminal law against domestic violence. However, criminal law is inclined to be somewhat clumsy, and there is in our society a tendency to overestimate both its effectiveness and its value as a deterrent. Also, dependence on criminal law may obscure the ongoing need for services, particularly for women, who often lack the economic viability and support systems to escape from a violent environment, and to attain a realistic bargaining position if they do.

I have attempted to give a quick overview of some of the legal issues in marriage dissolution. For many of these issues there is no easy resolution; nonetheless, it is exciting to find people engaged in seeking answers.

Divorce Mediation

GERRY GAUGHAN

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Most of what George Thompson has said has some bearing on the area of divorce mediation, and I certainly concur with the objectives he outlined for this area. I would like to give an introduction to the topic of mediation.

The object of "counselling", as defined in the Divorce Act of 1968, is reconciliation. This objective provided the rationale for the formation of the Divorce Counselling Unit of Health and Welfare Canada. However, the limited scope given counselling in the Act often led to the unfortunate consequence that it was not recommended by lawyers in cases where reconciliation seemed impossible. Nevertheless, conciliation programs related to custody, access, maintenance, and property have evolved over the years in a number of provinces. A major component of the unified family court system originally proposed by the Law Reform Commission was a conciliation service or counselling unit that would act as the "social arm" of the court. This has not yet been implemented on a nation-wide basis.

The process of mediation is the most recent and innovative development in the interface between family law and social services. Dr. O.J. Kuger, Dr. John Haines, and Dr. Sheila Kessler are the dominant names in the field of mediation in the United States; in Canada, Dr. Howard Irving of the University of Toronto is pre-eminent.

As in any new field, there is currently much discussion about such questions as what mediation does, who does it, and how it is done. I would like to give you a couple of models that show how mediation occurs in practice.

Basically, when we talk about mediation, we are talking about a dispute resolution technique concerning some area of disagreement between adults in the dissolution of marriage. We in the field work on the assumption that if disputes can be mediated in some healthy manner, the children involved in the divorce will benefit.

Mediation deals with four main areas of contention: custody, access, maintenance, and matrimonial property.

The Canadian authority, Dr. Howard Irving, has drawn a clear distinction between mediation and either marriage counselling or family therapy. In his view, (which is not uniformly accepted), mediation is a method of resolving family disputes in the best interests of the children. He suggests that the mediator's objectives are independent of the narrowly-defined interests of each spouse, and that the mediator's role is advisory in nature.

The resolution of a mediated dispute is ultimately based on interpersonal processes between and among family members; the decisions reached are decisions of the family.

Irving's approach to the mediation technique highlights a couple's right to settle their own disputes through an independent third party, and emphasizes their ability to do so. The technique is not universally applicable, however, as the peculiar personality needs of some couples render mediation ineffective as a means of settling disputes. In addition, the technique is not yet flawless. In situations where a gross imbalance of power exists between two partners, only a very skilled mediator can ensure a fair resolution of disputes.

Styles of mediation may vary. For instance, interviews may occur with each partner separately, with both partners together, or with the lawyer present. They may also be co-mediated. Judges often mediate in pre-trial conferences. In Ontario, an association for family mediation has been established; about half of its members are lawyers and half are mental health professionals. The British Columbia Bar has established guidelines for mediation as practised by lawyers. Ontario law distinguishes between "open" and "closed" mediation. In closed mediation, the mediator merely reports to the court that agreement has been reached; as I understand it, the agreement may or may not be upheld by the court. In open mediation, the court may require that certain aspects of the process and outcome be reported by the mediator.

A major issue in family dissolution is cost. One tangible benefit of mediation is that its cost is low compared with that of legal advice. Mediation fees are approximately \$75 to \$80 per hour, while legal fees range from \$120 to \$150 per hour.

Mediators have considered joint custody or shared parenting as an option. Shared parenting is now a presumption of law in several American states and in the province of New Brunswick; as a result, it is most certainly an area that will be subject to increasing investigation in the next few years.

I would like to make a couple of tentative recommendations:

- 1. The use of mediation techniques and conciliation processes in marriage dissolution should be promoted.
- 2. A unified family court system should be introduced, and some of the funds allocated to families at crisis points should be directed to the process of family dissolution.
- 3. At the very least, compulsory information and education sessions should be instituted to heighten the awareness of couples to the options and services available to them in this field. These exist in some jurisdictions in the United States.

There are a great many more things that could be said about the process of mediation, particularly in terms of how it is practised in both the public and private sectors. I have provided only one model, but there are various methods currently in use. The subject of divorce mediation merits attention, and I would be pleased to engage in more intensive discussion on it.

Health

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I would like to emphasize the size of the problem under consideration. One in three Canadian marriages breaks down, and 60 per cent of these involve children. We are dealing with an epidemic life crisis situation.

Research by both Wallerstein and Kelly and Hetherington and Cox into the effects of separation and divorce on children has established that, in the first year following divorce, certain kinds of behavioural changes are almost universal among children. Among the determining factors are the child's age at the point of separation, his relationship with the custodial parent, and his relationship (or lack of it) with the absent parent. Boys seem to be more severely affected than girls. This may be a result of greater exposure to parental conflicts on their part, but it may also be caused by a greater vulnerability among boys to all kinds of life stresses.

Mavis Hetherington has pointed out that parental divorce is only one of a series of changes in the lives of children in this situation. All of these changes constitute life crises, which increase the child's vulnerability to physical and emotional disturbances. Due to financial constraints, these children are often in danger of losing not only their parents, but also their home, their school, and their friends. Moreover, parents become markedly ineffective in the year following divorce. Mothers with custody of the children often become inconsistent, while the children, particularly boys, become difficult -- cantankerous, aggressive and demanding. This results in poor interaction in the relationship between mother and child: as the child becomes more difficult, the mother becomes more anxious and ineffective, and the child in turn becomes more anxious, so more difficult. The problem escalates.

Hetherington points out that there is a good chance of improvement in the child's reaction by the end of the second year following divorce, especially when it has occurred under amicable circumstances. This probability underscores the importance of mediation as a means for divorcing parents to reach agreement.

Within five years following divorce there is at least a 75 per cent chance that the custodial parent will remarry; as a result, the nature of the relationship between parent and child will be subject to renegotiation. Children of single parent families who have become accustomed to shouldering increased responsibility may be required to return to a role more in keeping

with their age. In addition, they may be required to change ordinal positions if new children are entering the family. I want to emphasize that it is not just one but a series of life crises to which children of divorce are exposed.

What is our health care system doing about this problem now? So far it has failed to give sufficient serious consideration to the life crises faced by children of divorce, given the number of children affected, the extent of their suffering, and the nature of the problems that result.

Health services currently make custody assessments, but often these are not adequately carried out or are simply not available because of the time commitment they require (18-25 hours). Health services are also confronted with parents who deny any link between their children's behavioural problems and their own marital problems.

I suggest that we provide the following services for children of divorce and their parents:

- 1. Group discussion sessions for children should be set up in a nonstigmatized venue (such as the school). Help may then be made available to children in need whose parents have not sought help for them.
- 2. Mediation and counselling services should be made available to parents themselves, particularly those at the point of separation. Situational groups that include other parents experiencing similar life crises are likely to be more effective than individual professional counselling. However, referral mechanisms must exist for both children and parents in need of individual counselling. From these groups people capable of co-leading new groups might emerge.
- 3. Teachers must be sensitized to the effects of parental separation on children so that the child is not penalized for a decline in performance. Teachers should be provided with consultation and professional backup. Agency workers in contact with the family should be given the support they require. Family physicians, too, must be sensitized to the problems a divorcing family might face, and should be made familiar with available services.

The provision of services to children of divorce is a large area that we have not even begun to develop. An effective response to the needs of these children requires, first and foremost, a change in our way of looking at them. We should not think in terms of categories of disturbance or disorder, but in terms of the series of life crises that children of divorce commonly face. Our emphasis should be on preventive intervention.

Synthesis of Discussion on Services

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In our discussion of children affected by separation and divorce, we must remember the two most important elements of any approach to children's mental health -- we must think clearly and retain our sensitivity. There are intellectual issues in the design and delivery of services that require calm, critical consideration, but, as Ivy Williams and Craig Shields both pointed out in their presentations, a keen awareness of the human dimension, of the suffering these children experience, is equally important.

With this in mind, I would like to present the following model of intervention for children of separation and divorce:

- 1. BURDEN OF SUFFERING-- How large is the problem?
- 2. ETIOLOGY-- What causes the problem?
- 3. EFFICACY TRIALS-- Are there any forms of intervention that do more good than harm under ideal conditions?
- 4. EFFECTIVENESS TRIALS-- Do any forms of intervention do more good than harm under "real" conditions?
- 5. EFFICIENCY TRIALS-- If any form of intervention proves both efficacious and effective, can it be delivered in a manner that is cost effective?

If it passes the efficiency trial, the mode of intervention must be referred back to its original goal: does it reduce the burden of suffering?

1. BURDEN OF SUFFERING: Keep in mind that in children's mental health, this always involves four dimensions: (i) How many children are affected? (ii) How bad is their situation during childhood? (iii) Does their disturbance continue into adulthood? (iv) What is the cost in both human and financial terms?

Currently, we have fairly extensive data on the numbers involved, and some data on childhood morbidity. On adult morbidity, however, we have very little data. We need to know, for example, the extent to which these disturbances (such as thumb-sucking, enuresis, or mild neurotic disturbances in childhood) are self-limiting, and how many of these disturbances have serious sequelae, such as conduct disorder, that extend into adult life. When resources are scarce, it is useful to know which children might develop lifelong disturbances, so that an appropriate proportion of resources may be allocated to that subgroup. The cost is indeed very high in both human and financial terms.

It is important to determine the extent of suffering in order to establish the urgency of the problem and the need for services, and also to attract the clinical research and teaching endeavours necessary in the field.

2. ETIOLOGY: An important distinction must be made between the risk factor or condition (divorce or separation) and its sequelae (what results from it). Some programs are directed at the risk factors themselves; that is, they try to prevent divorce or separation. Others try to reduce the harmful sequelae of the risk condition, that is, the disturbances that occur among children of separation and divorce. These two types of programs are radically different in kind. Within the present model of intervention, attention will be focused on programs directed towards sequelae.

We need more research in order to determine why some children and not others are affected by parental divorce. We should try to develop and test causal chains. For example, is there a viable causal link in the assumption that because divorce can create guilt in children, it often causes them to become seriously depressed?

It is known that certain contributing factors interact in an additive way. Are such factors as pre-existing marital discord and socio-economic class among these? Some factors may also interact transactionally; for example, we know that children who are temperamental are much more likely to become scapegoats. But are children with a history of temperament problems at highest risk for the harmful sequelae of separation and divorce? Finally, contributing factors may interact to produce a multiple effect, as Brian McConville has indicated.

I have tried to illustrate the need for etiological studies in this field. Nonetheless, intervention projects must be undertaken before all the necessary research is completed. As we acquire more knowledge about etiology, our intervention programs will certainly become more effective. Because this field of separation and divorce is so broad, however, the possibilities for research are almost limitless; as a result, we must undertake intervention projects for children despite our yet incomplete understanding of the problem's etiology.

3. EFFICACY TRIAL: Efficacy trials, perhaps more than any other stage in this model, require clear thinking. A stable program that appears to be successful must be in place before an efficacy trial can be undertaken. Such trials are formal evaluations of the program.

The following are some things that should be kept in mind when an efficiency trial is undertaken:

- -- The GOAL of the program must be specific, and must be based on hypotheses (such as causal relationships) derived from the research in the field.
- -- The TARGET GROUP must be clearly defined. Children of separation and divorce do not form a homogeneous group; rather, the group consists of children who have shared a similar experience, but who have various different needs. One program can serve only certain needs, and should therefore be limited to a specific subgroup.
- -- The DESIGN of a program can take one of two forms. The treatment group can be compared with a control group. The problem with this approach is the selection factor; it is difficult to prove that the groups were equivalent before the program began. The best type of program is that based on some kind of randomized trial, in which subjects are assigned at random to one of two different treatment groups, or to either a treatment or a control group.
- -- The intervention cannot be evaluated unless it is REPRODUCIBLE. In addition, cooperation on the part of all the children involved must be ensured, and the collaboration of professionals from other fields should be enlisted when the interventive program most effective involves several areas of expertise.

In terms of sequelae, there are two types of preventive intervention, primary and secondary. The advantages of primary prevention are that it prevents the sequelae; as a result, the chances of service delivery are better, since established disorders are frequently difficult to treat.

Preventive intervention can be implemented on a "community-wide", a "milestone", or a "high-risk" basis. While some children may have to be treated individually, the problem is now too widespread for intervention to occur solely on a case-by-case basis. Community-wide intervention must be considered. If implemented on a large scale, there is no risk of labelling. However, labelling, especially mislabelling, is a danger inherent in "high-risk" preventive programs. It is not possible to identify accurately which subgroup of children or which individual child will develop a particular disturbance, though one can generally identify which groups risk developing this disturbance. As a result, great caution must be exercised in the selection of large groups of children as subjects of primary prevention programs for high risk groups.

In the area of follow-up, psychometrically sound instruments are necessary, all subjects must be followed up blindly, and a wide variety of outcome measures must be taken.

4. EFFECTIVENESS TRIAL: If a certain form of intervention proves successful, it is necessary to determine what factors have contributed to its success and how it can best be applied in other settings. In North America, workable programs have often become class-linked. We have a responsibility to ensure that services are made available to the children with the greatest need, regardless of their social class.

Because they can be very expensive, effectiveness trials should not be carried out until the program has proved successful under ideal conditions.

EFFICIENCY TRIAL: The challenge of the efficiency trial is to develop forms of intervention that can be implemented widely without being unnecessarily costly.

Finally, once an efficient program has been discovered, it must be applied to determine whether it is successful in reducing the burden of suffering.

Similar criteria apply in the field of teaching. Clearly-defined goals are necessary, and evaluation of methods is essential, so that effective teaching methods can be implemented on a wide scale.

I would like to conclude with the following recommendations:

- a) The burden of suffering must be established on the basis of Canadian data. If we determine what information we already have, we can more accurately define what information we lack.
- b) Etiology: Canadian research should be undertaken on sequelae. Existing data must be assessed, in order that areas for further study can be identified. In particular, there should be a focus on etiological studies of the type that can be undertaken better in Canada than anywhere else.
- c) Efficacy: Where there is evidence that a certain form of intervention is efficacious, it should be applied to different groups of children and parents across the country.
- d) Intervention Programs: Multidisciplinary collaborative efforts must be made to identify intervention programs that meet the formal prerequisites for efficacy evaluation.

e) Networking: The academic and service communities should establish working relationships that will facilitate the successful implementation of models of intervention such as that which I have proposed. The ultimate goal of their collaboration must remain, however, a reduction in the burden of suffering of children affected by separation and divorce.

WORKSHOP REPORTS

Eight workshops were held during the symposium, each of which provided participants with the opportunity to discuss more fully one of the topics treated in the panel presentations. In general, the discussions proceeded from establishing an awareness of the issues, to an examination of preventive intervention measures, through an elaboration of some modes of service delivery and an identification of suggested areas for further study and action.

Certain themes tended to recur in the workshop discussions and reports, although each workshop considered these from its own perspective. Issues which found expression in many forms were the following: the need for more Canadian-based data on all aspects of the problem; the desirability of adopting a multidisciplinary approach; the importance of establishing collaborative linkages among professionals and between formal and informal helpers; the need for training to heighten the awareness of workers on all fronts to developmental stages and stress points and to the symptoms of disturbance; the importance of public and family life education, of community involvement, and of recognizing cultural and ethnic needs and differences; the need for a more uniform distribution of services, and the importance of developing a legal process that is sensitive and responsive to the needs of children.

The summaries which follow record the discussions of the workshops as reported by coordinators and rapporteurs. The recommendations which emerged from each workshop have been incorporated into the final recommendations of the symposium, presented in the concluding chapter of this publication (p. 86)

Day One: The Need for Services

I. FAMILY DEVELOPMENT - CRISIS POINTS

DR. BRIAN MCCONVILLE, COORDINATOR DR. TIM YATES, RAPPORTEUR

It is necessary to understand developmental stress points in order to establish appropriate and effective intervention programs and to direct them to the appropriate target group (i.e. children, parents, or society at large).

In urban centres the nuclear family seems to be more vulnerable to breakdown under stress and to the sequelae of breakdown. This may be the result of alienation from the traditional support system, the extended family. Established local support networks exist, but are not sufficiently extensive to include all members of a large community in need of assistance. New members of the community are particularly vulnerable, as their ties to support systems are non-existent.

Several models of service exist which attempt to compensate for the lack of adequate natural support networks. Vancouver's "Family Houses", for instance, are gathering places supported by both the community and the government, publicized by flyers and word of mouth. In this way, the best models provide assistance as a natural extension of the community's own support network, rather than as artificial interventions by external agencies. However, the dilemma facing those who provide services is the reconciliation of community and professional emphases, which can be conflicting. Spontaneous, "grass-roots" or community-based operations frequently lack quality control, but over-professionalized services tend to intimidate clients, particularly those of lower socio-economic groups, and to serve more the convenience of professionals than the needs of the target population.

Parents are frequently unable to discriminate among the many types of guidance and services available. In addition, medical professionals are often unable to devote sufficient time to families in need due to the restraints imposed on them by the medical fee schedule. As a result, serious gaps in service exist. Studies have revealed that 80 per cent of available services are likely to be consumed by only 10 per cent of their target population. In particular, those services aimed at lower socio-economic groups are often taken over by the middle classes.

Furthermore, those seeking aid often flit from one service to another, a practice which not only consumes much professional time needlessly, but also eliminates the possibility of continuity in care, rendering even the best of services less effective. Public education, particularly in the area of prevention, might eventually ease the demand on services, but educational campaigns are made difficult by the need to reach people who are not yet and may never be faced with the problem.

II. EXPERIENCES OF THE CHILD

DR. YVON GAUTHIER, COORDINATOR ELINOR MACLELLAN, RAPPORTEUR

The extent to which a child suffers as a result of family breakdown seems to be related to several factors, including his age, his relationship with each parent, and even the size of his family.

Although there is no age at which the separation or divorce of parents does not cause suffering, children between two-and-a-half and six years old appear to be most vulnerable. Evidence suggests that adolescents are also affected seriously, more so than children in the nine to 11 age group.

There may be a somewhat closer relationship between mother and child due to the bonding occurring biologically during pregnancy and naturally during the nurturing years of infancy. (A useful text on this subject has been published by Dr. John Brazelton of Harvard University). Nonetheless, the child seems to adjust to separation more easily when he sees both parents regularly.

During separation, the child feels that his entire world is falling apart. It is extremely important that some sense of structure and stability be restored to his life. Children with brothers and sisters might survive a separation more easily than a single child would, since some sense of family structure remains in the relative stability of their relationships with each other.

III. EXPERIENCES OF THE MOTHER

IVY WILLIAMS, COORDINATOR ELIZABETH RAJKUMAR, RAPPORTEUR

If parents could be provided with guidance early in the process of marital breakdown, their ability to cope with the distress of their children would be enhanced. Yet such early intervention is difficult, for it requires recognition of the important, though often fine, distinction between marital problems and marital breakdown.

Frontline health service workers, especially family physicians, are in frequent contact with mothers and their children through hospitals, clinics and schools. They are, therefore, strategically placed to recognize the early signs of marital problems, and to refer families in need to appropriate agents or agencies.

The agents or agencies to which referrals are made should establish information links with each other, not only to keep themselves informed of their respective functions, but also to increase awareness of common issues and problems. This would enable workers to effectively meet the needs of those families experiencing breakdown, and to help them view their problems realistically.

In rural areas, both families and helping agencies may feel isolated from each other and from developments in the fields relevant to family life issues. Self-help groups in these areas, operating with the assistance of as many disciplines as may be present in any one location, could identify points at which early intervention would be most effective. This type of program would provide a practical guide for coping not only to families headed for breakdown, but also to couples contemplating marriage or a serious commitment.

IV. EXPERIENCES OF THE FATHER

CRAIG SHIELDS, COORDINATOR BRENDA STONEHAM, RAPPORTEUR

The concept of the family as a safe place to grow up in, the child's need for physical protection, and the types of abuse to which children might be exposed were issues discussed in this workshop.

In addition to the traditional nuclear family, there are other increasingly common family constellations that can effectively fulfil the child's needs. The father as a single parent is one of these. However, this type of family also experiences distress and needs assistance as parent and children both pass through the immediate crisis period of separation or divorce. In cases of marital breakdown, quicker, more efficient legal procedures could reduce the crisis period of familial instability and so lessen the trauma caused by the transition from one type of family to another.

Traditional mental health services in Canada will need to become increasingly sensitive to families that are culturally and ethnically different. In addition to its other effects, family breakdown can also produce adverse cross-cultural sequelae. For example, specific services may be necessary in order to address the needs of a father whose earlier acculturation ill-prepared him for sole parenting in a society in which his offspring are more socially and linguistically competent than he is.

It is necessary that a multi-disciplinary approach to these issues be adopted, and that services be coordinated, especially in urban centres, so that duplication and repetition might be avoided.

Day Two: Systems and Services

V. EDUCATION

DR. KEITH SIGMUNDSON, COORDINATOR JOANNE COOK/BRENDA WATTIE, RAPPORTEURS

The educational system could play an important role in detecting and assisting children affected by separation and divorce. This would depend on the willingness of educators to intervene and be trained to identify and alleviate problems. However, the entire question of the role of teachers in mental health must be approached with sensitivity, due to the diverse pressures and demands to which they are continually subject.

Children's services have already been set up by various boards of education across the country. A child guidance centre has been established in Winnipeg to serve the schools. It is funded largely by the Department of Education, except for its psychiatric component, which is financed by the Department of Health. In Ottawa, a program called "step-by-step" has been established to send volunteers into the schools several times a week in order to spend individual time with emotionally disturbed children. In addition, the Ottawa Mental Health Program conducts special education classes in two schools with a high proportion of poor children, and has introduced several facilities, such as a drop-in centre for mothers with pre-school children and a toy library, which appear to have resulted in better adjustment to school among kindergarten children.

Nonetheless, the Winnipeg and Ottawa programs are not typical; rather, they are random models of successful services that are sorely lacking elsewhere. In particular, the lack of coordination of programs and services in such provinces as Ontario has resulted in services that are fragmented and sometimes overlapping. On the other hand, children's services are comprehensive in Manitoba and Prince Edward Island, where they fall under the jurisdiction of a single coordinating body.

VI. SOCIAL SERVICES

MISH VADASZ, COORDINATOR DR. KATHRYN SAULNIER, RAPPORTEUR

Formal social services alone are insufficient to meet the needs of all members of any community suffering from this widespread problem. Perhaps this is as it should be, for their formal, professional orientation can sometimes instill in those they serve an unhealthy sense of victimization. Ideally, formal services would cooperate with informal, community-based helpers or groups in the provision of services, acting primarily in a consultative capacity, providing direction and coordination, maintaining standards of service, and disseminating preventive information. Finally, there should be effective collaboration and consultation between social services and the other human service jurisdictions of health and education.

VII. THE LAW AND DIVORCE MEDIATION

JUDGE GEORGE THOMPSON AND GERRY GAUGHAN, COORDINATORS JUDGE GEORGE THOMPSON, RAPPORTEUR

Research suggests that support arrangements which arise out of mediation are at least as effective as those enforced by court order, and access so arranged is actually more effective. Yet the long-term effectiveness of divorce mediation as a legal practice will depend on the qualifications and skills required of mediators and the standards established for the process.

Existing procedures for the enforcement of court orders, particularly support orders, are inefficient and difficult to improve. The court's inability to enforce support orders has a very real effect on the child's well-being, for it often results in forcing the custodial parent onto the public welfare system.

It is difficult to draw conclusions from the evaluative studies available on the subject of joint custody, because parents who agree to that type of arrangement are often more capable of cooperating with one another to begin with. Joint custody would most likely be more successful, however, if couples were encouraged to recognize that their responsibility as parents transcends conflicts in their relationship with each other.

Society's insistence that the father continue to play a parenting role following separation or divorce may require reassessment in light of the emergence of substitute family constellations. Evidence suggests that after separation children often turn to members of the mother's family for male support, and that fathers tend to move freely in and out of their children's lives.

VIII. HEALTH

DR. NAOMI RAE-GRANT, COORDINATOR JOHN LACKEY, RAPPORTEUR

As a result of their specialized, very particular training, professionals often tend to label parents and compartmentalize problems. A genuine interdisciplinary approach would discourage this tendency, but very little progress has been made in that area. In fact, many pilot projects have failed.

Given the widespread occurrence of family breakdown, sufficient one-to-one professional help cannot realistically be made available to all the families affected. Prevention is the best way to cope with this growing problem in the long term. If the needs of parents were addressed, their ability to deal with their children's problems would be enhanced. Unfortunately, enlisting adequate support for preventive programming is difficult, for government programs (such as CAP) are more inclined to fund services for the sick than preventive services for the healthy.

To date, much of the research into the effects on children of separation and divorce has been American-based. However, conclusions drawn on the basis of American data are not always applicable in Canada, because systems and processes here are quite different from those in the U.S.

CONCLUDING REMARKS

DR. BRENDA WATTIE Mental Health Division

In seeking solutions, it is important to bear in mind that the federal government is not homogeneous, and that there are constitutional limits on its powers. For example, the negotiation and drafting of major federal-provincial legislative initiatives, such as the Canada Assistance Program referred to by participants, involve many years of work, and they are not easily changed. Moreover, in the case of cost-shared services, it is a requirement that the provinces initiate and develop the specific programs and services before the question of cost-recovery from the federal government can even be considered. Thus action lies very much in the provincial field.

In the area of marriage counselling, as provided by family service agencies and associations, a portion of the costs of service has to be recovered on a sliding scale from consumers. Thus, for middle income families marriage counselling by social workers is often more expensive than counselling by psychiatrists, though generally it is freely available to families on welfare. If ready access to marriage counselling is to be provided, the initiative lies within provincial jurisdictions.

The question of helping children affected by separation and divorce is one of major urgency, and the lack of human and economic resources to make an impact on the problem is acute. The Mental Health Division is currently able to accomplish more than its resources might suggest only as a result of extensive networking and the assistance of many people across the country.

The proceedings of the Symposium will be published and widely distributed within Canada in order to carry to a wider audience the stimulating exchanges that have taken place here. I believe the document derived from these three days will constitute a significant landmark in our country's movement towards greater sensitivity to the needs of our children, a movement that will result in increasingly better programs for distressed children. I would like to offer our sincere thanks to all the participants in this event for the outstanding contributions they have made.

RECOMMENDATIONS

General Recommendation 1:

Marriage breakdown has become a strikingly widespread phenomenon in our society; it occurs to varying degrees at all socio-economic levels and among all ethnic or cultural groups. It is therefore urgent that the problems of children affected by separation and divorce be examined and that appropriate services of quality and flexibility be made available.

Specific Recommendations:

- a) Training (Pre-Service and In-Service):
- -- Schools of social work, medicine, and education should be encouraged to address in their curricula developmental stress points and the special needs of children affected by seperation and divorce.
- -- Special training should be offered to front-line health service workers and those likely to encounter the family during developmental crisis points (i.e. family physicians), so that they may recognize the symptoms of an emotional problem and make appropriate referrals during its early stages.
- -- Classroom teachers should be trained to strengthen the coping skills of students at various levels of development.
- -- Lawyers and judges should be trained in the use of negotiating skills, and encouraged to use them, rather than adversarial techniques, for the resolution of family disputes.
- Ongoing training for both professionals and non-professionals working in the field should be considered. Community workshops, for example, would be an effective forum for consciousness-raising, inter-disciplinary training, and the development of appropriate referral patterns. The goals of such continuous training would be to develop a repertoire of possibilities and alternatives in service, to encourage interaction with the local community, and to update knowledge of both new colleagues and new programs in the field.

b) Informal Community Services

-- Informal services should be established in each community, including rural areas. Staff would provide individual or group sessions for parents, particularly those undergoing separation, and would be sensitive to the dangers of intimidating or unnecessarily labelling them.

- -- Communities should also provide workshops for the children, offering them therapeutic activities, peer support, and opportunities for the discussion of problems in a setting that is free of needless stigmatization. Means for referral should be established. Models for this type of service have been developed by the Family Service Association of Metropolitan Toronto and the Family Service Association of Vancouver.
- -- The development of networks of community support should be encouraged. These are particularly necessary in urban centres, where often the traditional support network of the extended family has been lost.

c) Formal Services

- -- Cost effectiveness: Both the needs of the "consumer" population and funding possibilities in realistic terms should be considered when public health services are planned, so that they will be not only useful, but also financially feasible.
- -- Effective service delivery: Monitoring and continuous care should be provided for families in need in order to discourage them from drifting from one service to another, a practice which not only consumes professional time needlessly, but also impairs effective service delivery.
- -- Target groups: Effort should be made to provide particular target groups and the support groups aiding them with mental health services appropriate to their needs. Foremost among those targeted should be families known to be at high risk, families in rural areas, and ethnically and culturally distinct groups.
- -- Model of service development: An abstract model of intervention appropriate not only in service delivery but also in the training of caregivers is that which is initially focused narrowly, which later expands to permit wider exploration, and is ultimately refocussed at greater depth.

d) Coordination of Services

- -- Existing services must be coordinated in order to maximize their potential. The duplication and repetition of services that often occurs in urban centres must be eliminated.
- -- In addition, cross-disciplinary links between small, fragmented services and other, larger systems would help to expand the range of services available to children and families requiring assistance. Such collaborative links between service systems would be particularly helpful in rural areas, where caregivers feel isolated from the mainstream and need to be kept informed of developments in the field.

-- Mental health services in general should be decentralized. Formal professional and governmental services should also collaborate with informal, community-based helpers in the development of services appropriate to the various needs of different areas. Formal services should play primarily a coordinating and consultative role, providing guidance and ensuring that services are available and evenly distributed in all regions.

e) Services in the School System

-- Psychiatric services must be made available to the school system so that children experiencing difficulties may be not only identified but also referred for help. Mental health professionals, perhaps as part of a multidisciplinary mental health team, should establish and maintain regular contacts with classroom teachers. Provincial authorities should coordinate the establishment of these programs in order to avoid inequities in service (particularly in rural areas) which might result if the initiative was left entirely to individual school boards or communities.

f) Services for Working Parents:

- -- Like parents who experience childbirth or adoption, custodial parents undergoing separation also require a period of adjustment. Consideration should be given to the possibility of giving them a leave of absence from their jobs, so that they could more easily make the transition to single parenthood.
- -- Since assisting distressed employees is in the mutual interest of the company and its employees alike, the development of comprehensive employee assistance programs should be encouraged. Many such programs have already been implemented successfully. In general, they should emphasize prevention in their approaches, and should be made available on a voluntary, confidential basis.
- -- Day care centres should increase the flexibility of their hours in order to reduce the stress experienced by working single parents trying to collect their children by closing time.

g) The Legal System as Service

-- As an organ of service to the public, the legal system requires streamlining, particularly in the area of family law. A unified family court system should be implemented on a nation-wide basis. Greater predictability is necessary in the law pertaining to separation and divorce, as is a reduction in the amount of discretion and associated subjectivity allowed in the courts.

- -- The legal process itself must be accelerated. This can be achieved through the regular use of mediation, the provision of assessment services for major disputes, and the establishment of statutory limits.
- -- The goal of the legal system in the area of family law is to resolve disputes, not aggravate them. In order to reduce animosity between former partners, the concept of fault as a factor in the resolution of disputes must be eliminated, particularly in the areas of support and custody. Mediation techniques and conciliation services should be introduced to the process of marital dissolution to help families avoid the legal process whenever possible.
- -- Perhaps most importantly, the legal system in general must recognize and accommodate the needs of children in separation and divorce proceedings. It is imperative that the new divorce legislation address these needs properly and knowledgeably. Legal representation should be provided for children involved in hotly-contested cases.

General Recommendation 2:

Services are now insufficient to meet the needs of all children affected by separation and divorce, and will become increasingly so in the future. As a result, caregivers must develop coherant strategies for prevention in order to reduce the effects of this problem in the long term.

Specific Recommendations:

- -- Marriage preparation courses: Due to the high failure rates of marriage and remarriage, it is urgent that young people understand the nature and limitations of marriage and adopt realistic attitudes in their expectations about it. They should be strongly encouraged to make use of preparation courses for marriage and family life.
- -- Parenting courses: Programs teaching direct parenting modes should be introduced, and efforts should be made to make them available to lower socio-economic groups and people in remote areas, who are often unable to participate in these types of courses because of expense.
- -- Family life courses: Both children and adults should be made more fully aware of the complexity of family life and its problems in current society. Whenever possible, professionals should be engaged to teach courses on family living. The subject of divorce and its sequelae in children should be addressed. Parents should also be more widely educated in family life through programs offered by parent-teacher groups, local associations, churches, and self-help organizations. Such courses for parents must be taught by skilled, experienced practitioners in family guidance.

- -- Public education program: The public must be made aware of the tremendous potential for emotional trauma inherent in the process of marriage breakdown. A generic public education program should be launched to heighten awareness of the issue, reduce the stigma associated with separation and divorce, and help those experiencing marital breakdown to view their problems realistically. In addition, an informational handbook should be prepared, which would explain pre-divorce procedures, problems likely to arise during divorce and methods to use in resolving them, reactions likely to be encountered, the time factor involved in divorce and recovery, and issues in the introduction of new partners and step-parenting.
- -- Provision of information: Information clearinghouses linked to integrated service networks should be established and publicized, so that families in crisis know where to turn for appropriate guidance.
- -- Mediation and conciliation: Informational and educational sessions regarding services available in the fields of mediation and conciliation should be made compulsory for couples undergoing marital breakdown.
- -- Funding of services: In order to achieve success, preventive services require government funds which are ordinarily allocated entirely to services for those already ill. The need for viable preventive strategies must, then, be promoted by parents and caregivers alike.

General Recommendation 3:

New research is an ongoing requirement. Existing data must be continually updated, and new areas of study must be continually sought. In addition, research in this field must be approached from a multidisciplinary perspective, so that the complexity of the problem may be addressed in its fullness. In order to adequately assess the effects of separation and divorce on children in Canada, we require far more Canadian research than at present exists.

The following are vital areas requiring Canadian research.

Specific Recommendations:

The use of pre-marital contracts should be studied to determine their effectiveness as preventive strategies. How extensively have they been used? Could they act as effective tools for public education? Do they offer an opportunity for dialogue between partners regarding potential problems while affection still exists and communication is easier? Are there any data to indicate that issues such as custody, access, support, and property division have been settled more easily as a result of the use of pre-marital contracts?

- -- A study establishing at what points in a marital relationship primary intervention is most effective would be very helpful.
- -- Research is necessary to establish why such high percentages of both marriages and remarriages break down. Comparative studies would help to illuminate the conditions that cause marital breakdown. Interprovincial epidemiological surveys should be conducted to discover why rates of suicide, divorce, and alcohol abuse seem to be higher in the western provinces. The lower rate of marital breakdown among certain ethnic and religious groups should be investigated in terms of the features that distinguish these groups from the general population.
- -- Research into the process of marital breakdown itself would also be useful for the development of effective preventive measures. Of particular interest are the initially transient stress reactions to an accumulation of problems in a marriage, which lead to long-term repetitive crises and, ultimately, to the final phases of exhaustion and despair which precede separation and divorce.
- -- Children must be made aware of the prevalence of marital breakdown and the problems associated with it. Studies should be undertaken to discover more effective ways of presenting these issues in school systems.
- -- The bargaining process of parents preparing for separation or divorce requires study in terms of its effect on them and on their children. In addition, an employee assistance plan should be instituted at various workplaces under controlled conditions in order to test the theory that aid to parents in crisis indirectly alleviates the stress on their children.
- -- The overall effect on children of legal procedures for divorce must be thoroughly researched. In particular, the concept of legal representation for children should be investigated in terms of its effect on the child before it is widely implemented.
- -- The role of mediation in resolving legal disputes is becoming increasingly important. It is necessary, however, not only to determine its rate of success, but also to measure this success in terms of the yet unknown effect of mediation on the adjustment of children.
- -- New or non-traditional approaches to child custody, such as paternal custody or shared parenting arrangements, require formal investigation so that the courts will be able to make informed decisions in this area.
- -- Research into the factors that determine why some children cope with separation and divorce better than others and why some parents and children actually adjust well to marriage breakdown should be

undertaken. The results of a longitudinal study comparing and contrasting children from intact and divorced families would be particularly useful. Single-parent families constituted non-electively (e.g. through death) and electively should also be studied. In addition, the effect of socio-economic conditions on adjustment to marriage breakdown should be addressed in a comparison of the children of high- and low-income divorced couples. Good studies of the effectiveness of intervention with children following family break-up would be most useful.

- -- Investigations of the long-term psychosocial sequelae of divorce and separation on children are necessary. These should include longitudinal follow-up studies of referred cases which evaluate the incidence of more serious, lasting disturbances arising from marriage breakdown, and which identify high-risk groups for this type of reaction.
- -- Generally, research in this field should be conducted on the basis of rigorous methods and in terms of efficacy, effectiveness and efficiency trials.

General Recommendation 4:

In order to maximize the potential of caregivers in the field, an ongoing exchange of information and ideas is necessary. Effective means to disseminate information derived from research findings must be developed.

Specific Recommendations:

a) PROPOSED INFORMATIONAL PUBLICATIONS

For Professionals and Government Officials:

- Titerature reviews for professionals, modelled on those of N.I.M.H. in the U.S.
- -- Training packages for judges, lawyers, doctors, social workers, and teachers, which would make available in a helpful way existing information on the effects of separation and divorce on children.
- -- A strongly policy-oriented summary of major research findings and an accompanying bibliography, to help senior provincial officials in the decision-making process.

For Professionals and Parents:

- -- An annotated bibliography on the subject of separation and divorce.
- -- Cross-Canada service rosters providing program descriptions and emphasizing innovative services.

For the General Public:

- -- A book or pamphlet for adults describing realistic expectations about marriage.
- -- A training manual for parents.
- -- A handbook describing what is involved, emotionally and legally, in separation and divorce, so that couples can understand possible courses of action and evaluate them realistically, on the basis of potential repercussions.
- -- Informational leaflets enclosed in Family Allowance cheques that would briefly describe the behaviour exhibited by children adversely affected by the breakdown of their parents' marriage, and recommend that the local family service agency be contacted in cases of persistent problems.
- -- Dramatizations of the lives of single parents and of their children in book or pamphlet form, for both children and adults.
- -- General informational pamphlets for distribution to both parents and children, and periodic pamphlets or news releases informing the public at large about trends and specific programs in the field.
- b) SUGGESTIONS FOR FUTURE PROFESSIONAL GATHERINGS

Issues in Separation and Divorce:

- -- Pre-marital education.
- -- Reducing the detrimental physical and emotional consequences of separation and divorce.

Related Children's Issues:

- -- The impact of separation and divorce on children at different stages of development.
- -- The mental health needs of adolescents in conflict with the law or in the custody of social agencies.
- -- Sexual abuse of children.
- -- Are adopted children more likely to develop emotional problems?

The Nature and Status of the Family:

- -- Variety and transition in families of different geographical regions and ethnic communities across Canada.
- -- The prevalence of the breakdown of the nuclear family.

- -- Alternatives to the nuclear family.
- -- The loss of community and extended family -- myth or reality?

 The Provision of Services to Children and Families:
- -- Strategies for intervention in cases of family breakdown.
- -- Issues in working with families experiencing separation, divorce, or remarriage.
- -- Universal social approaches (rather than individual case approaches) to the widespread problem of marriage breakdown in Canadian society.
- -- Establishing demonstration projects which seek a reduction in the divorce rate and provide assistance to children of separation and divorce.
- -- Training and skill development for professionals in direct service.
- -- Cross-Canada links between mental health systems and educational systems for the provision of services to children.
- -- Interdisciplinary cooperation, coordination of services, and case-sharing in different regions of Canada.
- -- The development of mental health services appropriate to the Canadian cultural mosaic.
- -- Obstacles to the provision of services (particularly administrative and service delivery problems)

Appendix A:

SYMPOSIUM PROGRAM

Services for Children Affected by Separation and Divorce Conference Centre Ottawa

January 16 and 17, 1984

Monday, January 16

Opening Remarks and Welcome

- Dr. Brenda Wattie

Keynote Address: Family Breakdown:

Before, During and After

- Dr. Quentin Rae-Grant

Discussion

Panel Presentations:

Moderator

A. Family Development: Crisis Points

B. Experiences of the Child

C. Experiences of the Mother

D. Experiences of the Father

- Dr. Beatrice Wickett

- Dr. Brian McConville

- Dr. Yvon Gauthier - Mrs. Ivy Williams

- Mr. Craig Shields

Film Presentations - National Film Board of Canada

Workshops:

Co-ordinators

- Dr. Brian McConville

- Dr. Yvon Gauthier

- Mrs. Ivy Williams

- Mr. Craig Shields

Workshop Summaries and Reports

Videotape Presentation

Project for Children Experiencing Separation and Divorce

- Mrs. Rhonda Freeman

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Tuesday, January 17

Presentations on Systems and Services:

Chairperson

A. Education

B. Social Services

C. Law

D. Divorce Mediation

E. Health

- Dr. Jean Pettifor

- Dr. Keith Sigmundson

- Ms. Mish Vadasz

- Judge George Thompson

- Mr. Gerry Gaughan

- Dr. Naomi Rae-Grant

Workshops:

Co-ordinators

- Dr. Keith Sigmundson

- Ms. Mish Vadasz

- Judge George Thompson

- Mr. Gerry Gaughan

- Dr. Naomi Rae-Grant

Workshop Summaries and Reports

Synthesis of Discussion on Services

General Discussion Concluding Remarks

Adjournment

- Dr. Dan Offord

- Dr. Jean Pettifor

- Dr. Brenda Wattie

Appendix B:

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Dr. Keith Sigmundson	Community Psychiatric Services for Children, Winnipeg	Health Services Centre, 685 William Avenue, Winnipeg, Manitoba, R3E 0Wl
Judge George Thomson	Ontario Provincial Court, (Family Division)	311 Jarvis Street, Toronto, Ontario M5B 2C4
Dr. Mark Triantafillou	Department of Health and Social Services, Government of Prince Edward Island	Box 2000, Charlottetown, P.E.I. ClA 7N8
Ms. Mish Vadasz	Vancouver Health Department	1060 West 8th Avenue, Vancouver, B.C. V6N 3M2

NAME	AFFILIATION	ADDRESS
Mr. Brian Ward	Canadian Council on Children and Youth,	323 Chapel Street, Ottawa, Ontario, KlN 7Z2
Dr. Bea Wickett	Psychologist - Private Practice)	125 Somerset St. W., #201, Ottawa, K2P 0H7
Dr. Timothy Yates	Psychiatrist-in-Chief Alberta Children's Hospital, University of Calgary	1820 Richmond Rd. S.W., Calgary, Alberta T2T 5C7

Appendix C:

AUDIO-VISUAL PRESENTATIONS

On the first day of the Symposium participants viewed two films and a videotaped extract from a CTV W5 program.

The film presentations were intended to enhance participants' appreciation of the emotional difficulties faced by a child of divorce, and of the practical difficulties experienced by a family in breakdown attempting to find its way through the legal system. The videotape presentation described a model of intervention employed by the Family Service Association of Metropolitan Toronto.

A brief description of each presentation follows:

"The Way It Is"

National Film Board of Canada

This film dramatized the reaction of a 12-year-old girl, Helen, to the divorce of her parents, and her struggle to come to terms with the realities of the situation.

Participants saw Helen continuing to yearn for the reconciliation of her divorced parents, who had been apart for two years, and how her scheme to re-unite the family was frustrated by her father's cancellation of a planned visit. In an emotional confrontation with her mother, Helen admitted to feeling let down by both her parents, but finally recognized the necessity of accepting the situation for what it was and the importance of taking control of her own life.

The Family Court

This National Film Board of Canada film took the form of a panel discussion between representatives of the Law Reform Commission, the legal profession and the Toronto School of Social Work. The subject of discussion was the diffuse jurisdictional nature of the legal system as it operates to effect the process of family dissolution.

A dramatized insert portrayed the case of a couple whose marriage was ending in separation, the reasons for the marital conflict as seen by each partner, and the "nightmare of duplicate proceedings".

The film illustrated the need for a unified system to deal with the various facets of family breakdown.

Project for Children Experiencing Separation and Divorce (Family Service Association of Metropolitan Toronto)

Participants viewed a 20-minute videotape featuring "Separation, Divorce and Children", a program run by the Family Service Association of Metropolitan Toronto. The film was originally shown on CTV as part of a W5 program on January 1, 1984.

The program, funded by the National Welfare Grants Program of Health and Welfare Canada, was designed as a research study on the effects of separation and divorce on children. It consists of a series of six group sessions for their custodial parents, the focus of both groups being on the child.

An innovative brief model of intervention, the program uses a number of different therapy models to help children talk out their negative feelings regarding their parents' separation or divorce. The aim is to "flip" the children's attitudes from negative to positive, and provide them with a repertoire of coping responses.

The videotape presentation was introduced by Rhonda Feeman, Social Worker with the Family Service Association of Metropolitan Toronto, and principal investigator of this research project.

A major report on this project is now available from:

Family Service Association of Metropilitan Toronto 22 Wellesley Street East Toronto, Ontario M4Y 1G3

Appendix D

SOME RESOURCES RECOMMENDED BY PARTICIPANTS

SOME EXISTING SERVICES

Alberta:

CHILDREN OF DIVORCE AND ESTRANGEMENT SOCIETY

Dr. Lee Handy

205 Point McKay Terrace N. W. Calgary, Alberta T3B 5B6

Project Proposal: A city-wide service, available to any community with a suitable target group, providing direct assistance to children of divorce and estrangement in adjusting to changes in their family structure.

British Columbia:

DIVORCE LIFELINE

690 Burrard Street Vancouver V6C 2L1 (604) 669-5836

Regular meetings are held to provide information and give support.

FAMILY SERVICE OF GREATER VANCOUVER

1616 W. 7th Street Vancouver V6J 1S2 (604) 731-4951

"Kids from Divided Homes": Sessions in elementary schools (or elsewhere, as requested) for children of separated families.

"Uncoupling": Program encouraging the separated/divorced to finish with the past, confront present conflicts, and orient themselves toward the future.

B.C. COUNCIL FOR THE FAMILY

Victoria (604) 592-0516 or (604) 598-4675

Ongoing discussion groups providing mutual support for parents with young children.

DIVORCE LIFELINE

932 Balmoral Road Victoria V8T 1A8 (604) 386-4331

Weekly support groups; monthly public information meetings.

FAMILY COURT

2020 Cameron Street Victoria V8T 3N5 (604) 387-1896

Deals with custody and maintenance of juveniles, providing free "conciliation" counselling.

INTEGRATED SERVICES

1951 Cook Street Victoria V8T 3P7 (604) 388-9951

A branch of the Ministry of Health which offers comprehensive testing and counselling services for families with children who are experiencing social, emotional and/or developmental problems.

THE LAW CENTRE

1221 Broad Street Victoria V8W 2A4 (604) 388-4516

Provides public legal programs and ongoing workshops in family law as well as comprehensive legal services.

LAWYER REFERRAL SERVICE

Victoria (604 382-1415

Legal assessment for low fee

PARENTS WITHOUT PARTNERS

Victoria (604) 383-5180

Offers numerous family activities and functions, and lectures pertaining to single parenthood.

SINGLE PARENT RESOURCE CENTRE

1611 Quadra Street Victoria V8W 2L5 (604) 385-1114 Offers personal support and counselling, information about community services, group programs (including a women's support group), parenting courses, and special workshops.

N.B. For more information on the many other services available in Victoria, please refer to the handbook Services for Single Parents, by Gordon Hanson and Robin Blencoe. It may be obtained from the Blencoe and Hanson Community Office, 1020 Blanshard St., Victoria, V8W 2H5, (604) 382-9898.

Manitoba: FAMILY SERVICE ASSOCIATION OF WINNIPEG

Ray Ali 287 Broadway, 4th floor Winnipeg R3C 0R9 (204) 947-1401

A social worker in this agency provides group service to children affected by divorce. The program currently serves two schools.

INTERFAITH PASTORAL INSTITUTE

University of Winnipeg Winnipeg (204) 786-7811

Offers specific programs and counselling for divorcing families. Also offers workshops for schools, churches, and the general public. In the future, hopes to provide group programs for teenagers.

NORMA NEVISON

781 Campbell St. Winnipeg, R3N 1C5

Runs a program for school personnel.

Nova Scotia: ATLANTIC CHILD GUIDANCE CENTRE

Dr. G. Gordon Garden Park 1465 Tower Road Halifax B3H 4Z4

A mental health centre for children, which also provides a mediation service designed to help parents before and after divorce.

BACKMAN, R. E. & ASSOCIATES, LTD.

Mr. Ronald E. Backman Suite 302, 5614 Fenwick Street Halifax B3H 1P9

Group private practice of psychologists providing mediation (re custody/access), counselling, consultation and commissioned reports on disputes.

Ontario:

C.M. HINCKS TREATMENT CENTRE

Dr. Bonnie Robson Toronto (416) 924-1164

Group program for children of divorce.

FAMILY SERVICE ASSOCIATION OF METRO TORONTO

Rhonda Freeman 22 Wellesley St. E. Toronto M4Y 1G1 (416) 922-3144

"Children in Families Experiencing Separation and Divorce: Evaluating a Model of Planned Brief Intervention": Research project incorporating a clinical program.

"Coping With Life: The Child's Perspective": A series of sessions for separate groups of children and resident parents. In their groups the children can share their feelings, expectations, and attitudes towards separation. The parents' group focuses on helping the children adjust more successfully.

"Second Time Around: Communicating Effectively": Workshop for couples who are involved in a new relationship and want to avoid making some of the old mistakes. Couples examine their own communication styles and try out alternatives.

"Single Again": Workshop that helps individuals understand some of the causes of a relationship breakdown and the emotional reactions that follow. It helps participants adjust better to their single state and build confidence for the future.

"Single Parenting: Dilemmas Around Visiting": Workshop that explores how each parent can best handle issues around children visiting with the non-resident parent.

THISTLETOWN COMMUNITY CLINIC

Mrs. Libby Ridgely 51 Panorama Court Rexdale, Ont. M9V 4L8 (416) 741-1210

Provides specific family therapy services.

FAMILY SERVICE CENTRE

Joan Gullen Ottawa (613) 725-3601

Group programs

FAMILY REFERRAL AND CONCILIATION SERVICES

Molly Knowles
469 Montreal St.
P.O. Box 981
Kingston K7L 4X8 (613) 547-2228

Offers mediation services

WOODLAND HEIGHTS SCHOOL

Carl Thomas London (519) 471-7010

Group programs

SCHOOL OF SOCIAL WORK, LAKEHEAD UNIVERSITY

Prof. Melanie Waite

Group program dealing particularly with the rural response to separation and divorce.

FAMILY MEDIATION SERVICE OF ONTARIO

Helen Goudge 145 Queen St. W., Room 304 Toronto M5H 2N9 (416) 963-0918

Non-profit agency established to assist separated families with custody and access problems through counselling, education and research. Presents programs in collaboration with the Family Service Association of Metro Toronto.

ONTARIO ASSOCIATION FOR FAMILY MEDIATION

Jane Kerrigan-Brownridge Suite 14, P.O. Box 2213, Postal Station "P" Toronto M5S 2T2 (416) 453-7777

Development of mediation services.

ONTARIO CHILD HEALTH STUDY

Dan Offord Chedoke and McMaster Hospitals Chedoke Division Box 2000, Station "A" Hamilton L8N 3Z5

Project to gather data on the prevalence of correlates of child psychiatric disorders on the basis of a random sample of children in Ontario. Data will be available on the adjustment of the offspring of divorced or separated parents compared to other groups of children.

Prince Edward Island:

COUNSELLOR'S PANEL ON NEEDS OF CHILDREN OF SEPARATION & DIVORCE

Elinor MacLellan
Department of Education
Charlottetown C1A 7N8 (902) 892-3504

Program attempting to sensitize counsellors and teachers to needs of children of separation/divorce.

RETROUVAILLE

Diocese of Charlottetown Charlottetown (902) 892-5954

Program to help heal and renew troubled marriages, consisting of a weekend and several follow-up sessions.

Québec:

MASSEY-VANIER REGIONAL HIGH SCHOOL

Guidance Department C.P. Box 20 Cowansville J2K 3H2

Runs group programs.

SUGGESTED READING

I. GENERAL (PARENTS AND PROFESSIONALS)

- Academy of Psychology, in Collaboration with the Mental Health Division,
 Health and Welfare Canada. Helping Children Cope with Family
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FILMS (for relevant Canadian films, the most recent Catalogue published by the National Film Board is recommended.)













